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CONFIRMATION NO. 1196

<b>SERIAL NUMBER</b> 10/789,631	<b>FILING OR 371(c) DATE</b> 02/27/2004 <b>RULE</b>	<b>CLASS</b> 166	<b>GROUP ART UNIT</b> 3672	<b>ATTORNEY DOCKET NO.</b> HES 2003-IP-012179U1		
<b>APPLICANTS</b> Chester S. McVay, Carrollton, TX; Ronald E. Sweatman, Montgomery, TX;						
** CONTINUING DATA ***** <i>none</i> *****						
** FOREIGN APPLICATIONS ***** <i>none</i> *****						
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/20/2004</b>						
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>[Signature]</i> Examiner's Signature	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <i>[Initials]</i> Initials	<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 15	<b>TOTAL CLAIMS</b> 34	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 29920						
<b>TITLE</b> Annular pressure relief collar						
<b>FILING FEE RECEIVED</b> 1152	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			